

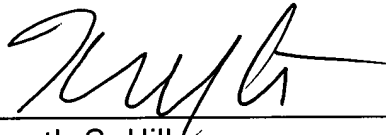


Enclosed find a check in the amount of **\$886.00** for the filing fee (Basic Fee **\$760.00**); (7 claims in excess of twenty (18.00) (**\$126.00**)). The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. **06-0580**.

Please conduct all correspondence in the above matter with:

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Respectfully submitted,



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